

Best Available Copy

1 of 2

CLAIMS ONLY						Application Number 10/618328	Filing Date	
						Applicant(s)		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51	
2							52	
3							53	
4							54	
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45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep			7				Total Indep	
Total Depend		62					Total Depend	
Total Claims		69					Total Claims	

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2 of 2

CLAIMS ONLY						Application Number 10/618328	Filing Date					
						Applicant(s)						
						• May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
101	Indep	Depend	Indep	Depend	Indep	Depend	151					
102			/				152					
103			/				153					
104			/				154					
105			/				155					
106							156					
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144							194					
145							195					
146							196					
147							197					
148							198					
149							199					
150							200					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					